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8 **UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF WASHINGTON**

9 THE ESTATE OF CINDY LOU HILL, by
10 and through its personal representative,
11 Joseph A. Grube; and CYNTHIA
12 METSKER,
13 individually,

14 Plaintiffs,

15 vs.

16 NAPHCARE INC., an Alabama
17 corporation; HANNAH GUBITZ,
18 individually; and SPOKANE COUNTY, a
19 political subdivision of the State of
20 Washington.

21 Defendants.

NO. 2:20-cv-00410-MKD

**DECLARATION OF JOHN E.
JUSTICE RE PLAINTIFFS' Rule
37(d) MOTION FOR DEFAULT
AND OTHER SANCTIONS
AGAINST DEFENDANT
SPOKANE COUNTY**

22 I, John E. Justice, hereby declare as follows :

23 1. I am over the age of 18, am competent to be a witness and have personal
24 knowledge of the following.

25 2. Attached hereto as exhibit 1 is a true and correct copy of the Spokane County
26 Sheriff's Office Field Case Report regarding the death of Ms. Hill.

3. Plaintiffs' counsel submitted a request for production in this case on or about
December 14th, 2020. Request for Production 8, therein, requested "all video footage showing

**DECLARATION OF JOHN E. JUSTICE RE PLAINTIFFS'
Rule 37(d) MOTION FOR DEFAULT AND OTHER
SANCTIONS AGAINST DEFENDANT SPOKANE
COUNTY – 1
Cause No.: 2:20-cv-00410-MDK**

*LAW, LYMAN, DANIEL,
KAMERRER & BOGDANOVICH, P.S.
ATTORNEYS AT LAW
2674 R.W. JOHNSON RD. TUMWATER, WA 98512
P.O. BOX 11880 OLYMPIA, WASHINGTON 98508-1880
(360) 754-3480 FAX: (360) 357-3511*

1 Cindy Lou Hill or showing the outside of any cells in which she was confined.” The County
2 responded that “[e]fforts are being made to locate” the requested footage.

3 4. As of March 23, 2021, counsel for the Estate of Ms. Hill was notified that all
4 available footage had been provided in response to RFP 8. I believed that to be the case at that
5 time.

6
7 5. On June 2, 2021, plaintiffs’ counsel noted a 30(b)(6) deposition of a Spokane
8 County representative to ask about the Jail’s video production in the case, and specifically
9 regarding the lack of recorded video of the 2W hallway from 9:15 a.m. to 4 p.m. on August 25,
10 2018. That deposition was completed on July 21, 2021. At the time of the deposition, I was
11 unaware that video footage from that time period existed and had been provided by the County
12 to my office.

13 6. While preparing the County’s response to the present motion, I was in the
14 process of documenting what Jail videos had been produced in discovery. At that time
15 additional video was located on my office’s server that apparently had been received from the
16 County sometime in March, 2021, but somehow went unviewed when it arrived and was
17 inadvertently not identified and produced during the production of other Jail video. That
18 video captures the date, time and location of Ms. Hill’s custody that is at issue in this motion:
19 namely the hallway outside cell 2W27 for 7 hours and 26 minutes on August 25, 2018,
20 following Ms. Hill’s arrival at that cell location. It has now been produced to plaintiffs’ counsel.

21 ///

22 ///

23 ///

1 I declare, under penalty of perjury, under the laws of the United States of America, that
2 the foregoing is true and correct to the best of my knowledge.

3 Dated this 7th day of January, 2022, at Tumwater, Washington.

4 *s/ John E. Justice*

5 _____
6 John E. Justice
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**DECLARATION OF JOHN E. JUSTICE RE PLAINTIFFS'
Rule 37(d) MOTION FOR DEFAULT AND OTHER
SANCTIONS AGAINST DEFENDANT SPOKANE
COUNTY – 3
Cause No.: 2:20-cv-00410-MDK**

*LAW, LYMAN, DANIEL,
KAMERRER & BOGDANOVICH, P.S.
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P.O. BOX 11880 OLYMPIA, WASHINGTON 98508-1880
(360) 754-3480 FAX: (360) 357-3511*

1 **CERTIFICATE OF FILING & SERVICE**

2
3 I certify under penalty of perjury under the laws of the United States of America and the
4 State of Washington that on the date specified below, I electronically filed the foregoing with
5 the Clerk of the Court using the CM/ECF system which constitutes service on the following
6 under LCR 5(b):

7 ***Counsel for Plaintiffs***

8 Erik J. Heipt, WSBA #28113
9 Edwin S. Budge, WSBA #24182
10 Hank Balson, WSBA #29250
11 Budge & Heipt PLLC
12 808 East Roy Street
13 Seattle, WA 98102
14 erik@budgeandheipt.com
15 ed@budgeandheipt.com
16 hank@budgeandheipt.com

17 ***Counsel for Defendant Naphcare & Gubitz***

18 Ketia B. Wick, WSBA #27219
19 Erin E. Ehlert, WSBA # 26340
20 Fain Anderson VanDerhoef Rosendahl O'Halloran Spillane
21 701 Fifth Avenue, Suite 4750
22 Seattle, WA 98104
23 ketia@favros.com
24 erine@favros.com

25 DATED this 7th day of January, 2022, at Tumwater, WA.

26 */s/ Tam Truong*

Tam Truong
Assistant to John E. Justice



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE REPORT

REPORTING DISTRICT: SV03

EVENT	REPORTED DATE/TIME	OCCURRED INCIDENT TYPE	LOCATION OF OCCURRENCE
	8/25/2018 18:17	Death-Unknown	Spokane County Jail
	OCCURRED FROM DATE/TIME	OCCURRED THRU DATE/TIME	1100 W Mallon AVE
	08/25/2018 18:17	08/25/2018 18:17	Spokane, WA

OFFENSES	STATUTE/DESCRIPTION	COUNTS	ATTEMPT/COMMIT

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)	NON-DISCLOSURE			
	Adult Deceased	Hill, Cindy Lou	N			
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)			
		55	1100 W Mallon (Jail) AVE Spokane, WA 99204			
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	White	Female			Black	Brown
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3		

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)	NON-DISCLOSURE			
	Adult Witness	White, Justin	N			
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)			
			1100 W Mallon (Jail) AVE Spokane, WA			
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	White	Male				
	DL NUMBER/STATE	PRIMARY PHONE Mobile	PHONE #2	PHONE #3		
		(509)477-4220				

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)	NON-DISCLOSURE			
	Adult Witness	Milholland, Matthew M	N			
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)			
			1100 W Mallon (Jail) AVE Spokane, WA			
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	White	Male				
	DL NUMBER/STATE	PRIMARY PHONE Mobile	PHONE #2	PHONE #3		
		(509)477-4220				

REPORTING OFFICER	DATE	REVIEWED BY	
592029 Urrutia-Soto	8/25/2018	Stockman, Andrew E	08/26/2018

**SPOKANE COUNTY SHERIFF**

CASE# 2018-10119070

FIELD CASE REPORT**ADDITIONAL SUBJECTS**

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	Adult Witness	Gubitz, Hannah N					N
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	1100 W Mallon (Jail) AVE Spokane, WA 99206						
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	White	Female					
	DL NUMBER/STATE	PRIMARY PHONE Mobile		PHONE #2	PHONE #3		
		(206)930-4102					

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	Adult Witness	Hoschka, Carolyn m					N
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	1100 W Mallon (Jail) AVE Spokane, WA 99206						
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	White	Female					
	DL NUMBER/STATE	PRIMARY PHONE Mobile		PHONE #2	PHONE #3		
		(509)844-5557					

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	Adult Witness	Killsen, Michael a					N
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	1100 W Mallon (Jail) AVE Spokane, WA 99206						
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	White	Male					
	DL NUMBER/STATE	PRIMARY PHONE Mobile		PHONE #2	PHONE #3		
		(509)499-8434					

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE		PHONE #2	PHONE #3		

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE		PHONE #2	PHONE #3		

REPORTING OFFICER	DATE	REVIEWED BY	
592029 Urrutia-Soto	8/25/2018	Stockman, Andrew E	08/26/2018



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE REPORT

NARRATIVE

On 08/25/2018 at approximately 1817 hours, I, Deputy Urrutia #592029, and Deputy Richmond, were in marked patrol unit B503 patrolling in the city of Spokane Valley, Washington (WA). We were dispatched to 1100 W Mallon Avenue (Spokane County Jail), in Spokane, WA to a dead-on arrival. The complainant was Jail Sergeant Justin White. Sergeant White said there was an in-custody death at that location. The deceased was Cindy L Hill DOB [REDACTED]. The Jail Lieutenant was requesting Major Crimes Detectives to investigate.

Prior to arriving, Sergeant White updated communications and said, Cindy passed away at Sacred Heart Medical Center (SHMC) at approximately 1831 hours. While in route, I was told Major Crime Detectives were going to investigate Cindy's death at SHMC. I was told to conduct my investigation at the Jail.

Upon arrival I started to gather the witness's statements. I spoke with Sergeant Justin White who said the following:

He heard the first medical assistance call at approximately 1725 hours. He called for medical assistance at cell # 2West 27, as Cindy was unresponsive. Cindy was not breathing and CPR/ AED Automated external defibrillator, were begun. CPR was done until Fire Engine 3 from Spokane arrived. AMR unit # 121 arrived shortly after fire. Cindy was monitored every 30 minutes because she was on an opioid withdrawal program. Cindy was pronounced deceased at 1800 hours. Fire medics felt a heartbeat on Cindy after she was pronounced dead, and again began life saving measures.

I spoke with Matthew M Milholland, a Corrections Officer who said the following:

He was making his found rounds, giving the inmates food. At approximately 1624 hours, he opened the food slot on Cindy's cell # 2West 27, and told Cindy to wake up. He saw Cindy laying down in her underwear on her stomach. At approximately 1626 he placed food on Cindy's food slot. He saw Cindy laying on the floor and told Cindy to get up and get her food. He said Cindy replied by groaning "ugh". He did not think much of it and thought Cindy was just tired. At approximately 1724 he came to Cindy's cell and saw Cindy had not taken her food from the food slot. He knocked on Cindy's cell door at least two times, and there was no response. He requested for medical assistance. Two medical assistants arrived and rolled Cindy over on her side. He saw what appeared to be vomit or bile on the ground near her face. Cindy was slid out of her cell by Michael, a registered nurse, who started CPR. CPR was done for approximately one hour. He conducted one round of chest compressions on Cindy for approximately two minutes until fire arrived. Cindy was transported by AMR unit #121. Cindy was pronounced deceased at 1831 at SHMC.

I spoke with Hannah N Gubitz, a medical assistant at the jail. Hannah said the following:

REPORTING OFFICER:

592029 Urrutia-Soto

DATE

8/25/2018

REVIEWED BY

Stockman, Andrew E

08/26/2018



SPOKANE COUNTY SHERIFF

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FIELD CASE REPORT

NARRATIVE (continuation)

She monitored Cindy all day. Cindy was on the opioid withdrawal program at the jail. She saw Cindy from approximately 0700 to 0800 hours. She heard Cindy complaining of stomach pain at approximately 0730 hours to medical staff. She advised medical staff. She saw Cindy at approximately 1500 hours and there were no signs of stress seen on Cindy. At approximately 1725 hours she heard over the radio medical assistance was needed at Cindy's cell. She arrived and saw Mike, a medical assistant at the Jail conducting AED protocol.

I then spoke with Carolyn M Hoschka, a Corrections Officer. Carolyn said the following:

She heard assistance was needed at cell #2West27. She responded and saw Cindy on the floor. Cindy was unresponsive and naked. Cindy's face had an unusual blue like color. She saw a pool of what appeared to be blood or vomit on the floor. Michael grabbed Cindy by her arms and dragged Cindy out of her cell. Strege, a Jail employee and Michael were doing chest compressions. She replaced Michael for several rounds of chest compressions, lasting approximately two minutes. Milholland took over her after she conducted chest compressions for approximately two minutes. She stood by watching, when fire and medics arrived. She took the magnets off Cindy's cell door to open the windows. This would allow the cameras to see inside Cindy's cell.

I spoke with Michael A Killsen, a registered nurse at the jail. Michael said the following:

He heard the medical assistance call over the radio. He responded to cell #2West 27, and found Cindy laying on her left side with vomit. He checked for pulse and found no pulse. He took her out the cell just outside Cindy's cell door. He conducted AED protocols. The AED showed no shock, and he placed an airway tube in Cindy's mouth. He gave Cindy 0.4 milligrams of nasal Narcan. He attempted to hook Cindy up to an IV. He conducted three to four rounds of chest compressions. He conducted the chest compressions for a total time of six to seven minutes. Fire arrived and found a pulse on Cindy. Fire took over life saving measures on Cindy.

I was then guided to Cindy's cell. Cindy was in cell number "2 West 27". I saw Cindy's cell was locked and secured. Nobody entered Cindy's cell after she was transported to SHMC. I saw food in Cindy's food slot. I saw clothing on the floor of Cindy's cell. I saw blood in the center of cell #2West 27. The cell appeared to be orderly and no obvious signs of struggle were seen. I took photographs of Cindy's cell.

I attempted to request the medical records on file for Cindy. I spoke with Jesus Ordaz, a Health Services Administrator at the jail who said the following:

He would not be able to provide me with Cindy's medical records. The medical records for Cindy will be

REPORTING OFFICER

592029 Urrutia-Soto

DATE

8/25/2018

REVIEWED BY

Stockman, Andrew E

08/26/2018



SPOKANE COUNTY SHERIFF

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FIELD CASE REPORT

NARRATIVE (continuation)

sent to another state for approval and then given to a lieutenant, which would then be sent to a Lead Investigator.

Major Crime Detectives Mitchell and Knight arrived and were briefed on the information I obtained.

I then cleared the scene after handing the scene to the Detectives.

I called communications and requested the personnel names of Fire Engine #3 and AMR unit #121. The following are names of Fire Engine #3; Maere Griffith, Joanna Balin, Daniel Anderson, Ricky Pennington, Michael Delamatter, Sean Doyle, and safety Officer Timothy Foster. The following are names of AMR unit #121; Jason Tenyehuif, and Matthew Laforce.

I certify under the penalty of perjury under the laws of the State of Washington that all statements made herein are true and accurate and that I have entered my authorized user ID and password to authenticate it. Place Signed: Spokane County WA

REPORTING OFFICER
592029 Urrutia-Soto

DATE
8/25/2018

REVIEWED BY
Stockman, Andrew E

08/26/2018



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

EVENT	REPORTED DATE/TIME 08/25/2018	OCCURRED INCIDENT TYPE	LOCATION OF OCCURRENCE
	OCCURRED FROM DATE/TIME	OCCURRED THRU DATE/TIME	

OFFENSES	STATUTE/DESCRIPTION	COUNTS	ATTEMPT/COMMIT

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

REPORTING OFFICER 591021 Mitchell	DATE 08/25/2018	REVIEWED BY Rosenthal, Jack R	09/10/2018
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SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE

On 08/25/18 at about 1844 hrs I received a call from Sgt Bloomer. He advised me there had been an in-custody death of a female at the Spokane County Jail. The victim had been transported to Sacred Heart Medical Center while receiving life saving measures and was ultimately pronounced dead at the hospital.

Detective Drapeau was the assigned lead investigator for this incident and I would be assisting him. Sgt Bloomer told me Detective Drapeau would respond to the hospital. He asked me to go to the jail, meet with the responding on call forensics person, and process the scene at the jail for evidence. Detective Roger Knight would also be responding to assist.

I arrived outside the jail at about 1955 hrs and met with Sgt Bloomer and Detective Roger Knight. Sgt Bloomer told me Deputy Richmond and Deputy Urrutia were the initial law enforcement response to the scene and had secured the cell of the victim and conducted interviews of the jail staff who were involved in the discovery and treatment of the victim, Cindy Lou Hill DOB: [REDACTED].

Deputy Richmond met with me outside the jail and confirmed that the cell where Cindy Lou Hill was discovered, 2W 27, had been secured and Deputy Urrutia had conducted interviews of the involved staff at the jail. (see Deputy Urrutia's report)

I received a call from Detective Drapeau at about 1956 hrs. He confirmed he was at the hospital with the body of Hill. His observations were that there was no obvious sign of trauma or sign of violence. The only bleeding was a small amount in Hill's airway which was consistent with intubation. He told me Hill was booked into jail on 08/21/18 and was under a medical watch for opioids withdrawal. He had noted the presence of needle puncture marks on Hill's body.

Detective Drapeau had been involved in the investigation of a previous in-custody death at the Spokane County jail. He told me to look for any issued medications, medical patches, devices for the inhalation or snorting of drugs, or envelopes which could have packaged the above items when I searched the cell of Cindy Lou Hill.

Forensic Technician (F.T) Samantha Micke joined us outside the jail. I briefed her on what I knew of the situation. F.T Micke, Detective Knight and I proceeded into the jail and met with Detention Services Sgt White. Sgt White led us to the the 2nd floor west wing, jail cell 2W27.

REPORTING OFFICER

591021 Mitchell

DATE

08/25/2018

REVIEWED BY

Rosenthal, Jack R

09/10/2018



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE (continuation)

We arrived at about 2035 hrs.

My observations of the exterior of the cell was that the door was secure and there was food present in the door food slot and a strand of toilet paper on the floor outside the cell door. I asked Detective Knight to speak with the inmates housed in the neighboring cells to that of 2W 27. He later advised that the inmate in 2W 28 had not been responsive to his questions and the inmates in 2W 26 and 2W 25 had not communicated with the inmate in 2W 27.

F.T Micke took photos of the cell exterior and Sgt White unlocked the cell door. She took photos from the exterior of the cell looking in prior to our entrance into the cell.

My observations of the jail interior: There was a dark fluid stain on the cell floor near the lower bunk. Near the stain was a gray piece of jail issue clothing. On the lower bunk there was a bundle of bedding and additional gray jail issue clothing. A roll of toilet paper was on the cell floor and a white styrofoam cup was on the desk area containing a yellowish fluid with small flecks of a material at the bottom of the cup. There were two books near the cell window- 'Wildest Hearts' and 'Good News Bible'. On the top bunk area was what appeared to be court paperwork and a type of sculpture made from toilet paper and feminine hygiene products. A small bathroom kit was on the lower bunk. There was writing above the lower bunk. It appeared to have been written in pencil and as near as I could make out it read, "I love forever always your baby girl". On the wall above the top bunk was written in a similar manner, "I love you sleepy" and "I love you family". I had no information as to if those writings were present in the cell prior to Cindy Lou Hill's arrival. In the bottom of the toilet in the cell I noted a white substance milky substance.

F.T Micke photographed the cell's interior before I began my search. As I identified items for collection as evidence F.T Micke photographed each item individually.

Corrections Officer Matthew Millholland arrived outside the cell as I was examining the interior. Millholland had made the discovery of Hill on the cell floor. I asked him to describe Hill's position on the floor. He described her as being in a fetal position on her right side. Her right cheek was on the floor with her feet towards the cell entrance.

The gray clothing on the floor was identified as a pair of pants.

I collected and packaged the following items as evidence:

REPORTING OFFICER

591021 Mitchell

DATE

08/25/2018

REVIEWED BY

Rosenthal, Jack R

09/10/2018

**SPOKANE COUNTY SHERIFF**

CASE# 2018-10119070

FIELD CASE SUPPLEMENT**NARRATIVE (continuation)**

Gray pants from cell floor, sample scraping of the fluid stain on the floor (obtained by F.T Micke), roll of toilet paper from the cell floor and strand of toilet paper from outside the cell, a gray jail issue top from lower bunk, and a fluid sample from the styrofoam cup (obtained by F.T Micke).

Detective Drapeau arrived to assist with the cell search. He confirmed the papers on the top bunk were court related and that the substance at the bottom of the toilet was remnants of toilet paper.

In my search of the lower bunk I examined three jail issue blankets and a white towel and the bathroom kit. The items were photographed but not collected. I examined the toilet paper and hygiene products sculpture but found nothing of evidentiary value. I examined the two books from the window area. I found inside the cover of the Bible a handwritten prayer type note, which was photographed.

The search of the cell was completed by 2156 hrs. Detective Drapeau and I took the items collected as evidence and secured them in my issued vehicle.

Detective Drapeau had learned Cindy Lou Hill was housed in cell 3W04 with Kimberly McNicol prior to being moved this morning. I went back to the jail with him to interview McNicol. We met with her in her cell at about 2315 hrs. Deputy Drapeau recorded the interview. (see Detective Drapeau's report). Essentially McNicol told us that Hill came into the jail about 4 days ago. She was sick vomiting and moaned and complained of being hot. McNicol assumed Hill was detoxing from heroin use. Hill's vomit was at first yellow but then turned green and black. Hill did not eat while they were housed together and only left to go to court. McNicol told the guards of Hill's condition. Staff came to check on Hill and removed her from the cell this morning. McNicol did not believe it was possible Hill had obtained drugs within the jail.

The interview ended at about 2225 hrs.

I took the evidence collected from the jail to the property room and was met there by Detective Drapeau. We placed the items on property as evidence and cleared the incident.

I went home and was there a short time before I was called again by Sgt Bloomer. He advised one of the inmates in a cell next to where Cindy Lou Hill had been housed was transported to

REPORTING OFFICER

591021 Mitchell

DATE

08/25/2018

REVIEWED BY

Rosenthal, Jack R

09/10/2018



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE (continuation)

the hospital suffering some sort of medical emergency. See incident #2018-10119234.

I certify under the penalty of perjury under the laws of the State of Washington that all statements made herein are true and accurate. Any omissions, errors or inaccuracies are inadvertent. I have entered my authorized user ID and password to authenticate it. Place
Signed: Spokane County WA

REPORTING OFFICER

591021 Mitchell

DATE

08/25/2018

REVIEWED BY

Rosenthal, Jack R

09/10/2018

**SPOKANE COUNTY SHERIFF**CASE# **2018-10119070****FIELD CASE SUPPLEMENT**

EVENT	REPORTED DATE/TIME 08/29/2018	OCCURRED INCIDENT TYPE	LOCATION OF OCCURRENCE
	OCCURRED FROM DATE/TIME	OCCURRED THRU DATE/TIME	

OFFENSES	STATUTE/DESCRIPTION	COUNTS	ATTEMPT/COMMIT

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)				NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)			
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3		

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)				NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)			
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3		

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)				NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)			
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3		

REPORTING OFFICER 59918 Drapeau	DATE 08/29/2018	REVIEWED BY Rosenthal, Jack R	08/29/2018
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SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE

On 08-25-18 at 1839 I received a call from Sgt. Bloomer. He advised me there had been an in-custody death at the Spokane County Jail. The victim had been transported to Sacred Heart Medical Center (SHMC) prior to being pronounced deceased.

I called the Jail Sgt. Office while I was preparing to leave the house I spoke with Corrections Sgt. White about the incident. He gave me a basic run down. He told me the decedent was Cindy Lou Hill and that at the time of her death Hill was in a cell, 2 W 27, by herself and had been placed on the second floor for a medical hold. ~~Sgt. White told me the cell was currently secured and was waiting the arrival of detectives but medical items from the hallway outside the cell had been picked up already.~~

I spoke to Sgt. Stockman who advised me patrol units, including Deputy D. Richmond and Deputy Richmond's rookie Deputy Urrutia-Soto were at the jail and requesting to conduct interviews of the corrections staff who had located and treated Hill as well as view the jail camera footage from floor number two. I gave permission for Richmond and Urrutia-Soto to go ahead with the interviews and video surveillance review.

Det. Mitchell and Det. R. Knight were also on call so I had Sgt. Bloomer send Det. Mitchell and Det. Knight to the jail to begin the processing of 2 W 27 with Forensic Technician S. Micke. I drove to SHMC and arrived on scene at about 1933. I went into the Emergency Department of the hospital and found the body of Cindy Lou Hill in a trauma room by herself. At the door, guarding the room were Corrections Officers Petrie and Epley as well as Jail Director J. McGrath.

I had radio page the Medical Examiner's Office at about 1939. I received a call back from Medicolegal Death Investigator N. Volpone at about 1952. Volpone advised me she was already in route to SHMC as was transport for the body of Hill.

I got my camera and took photographs of Hill as I found in her the trauma suite. Hill was on a back board but not strapped down, she was covered from the neck down with a white surgical blanket. After removing the blanket, I found Hill was clothed only in orange jail underwear. An Endotracheal (ET) tube was placed in her airway and secured with a strap. A medical band identifying the decedent as Cindy Lou Hill, [REDACTED] was around the right wrist. Hill had an IV placed in the back of the left hand which was taped down with Tegaderm film and medical tape. A disposable Oxygen sensor had been attached to left index finger. There was an Intra Osseous catheter placed in Hill's right proximal tibia, which had been secured by an Endotracheal (ET) tube cuff. Hill had defibrillator pads appropriately placed on her chest as well as four ECG pads, one on her right upper chest, one on the right shoulder, one on the lower right abdomen, and one on her lower left abdomen. I saw a piece of medical tape on the inner aspect of Hill's left forearm which appeared to cover a possible puncture wound from medical intervention but I could not see it well because it was covered.

REPORTING OFFICER

59918 Drapeau

DATE

08/29/2018

REVIEWED BY

Rosenthal, Jack R

08/29/2018



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE (continuation)

Hill had a healing scab on her left forearm. She had two obvious needle puncture sights over her left median Cubital vein. Hill had what appeared to be dried blood or vomit on the back of her left upper arm and a faded tattoo that looked like a star on her left shoulder. Over Hill's sternum was what appeared to be a healing abscess. Hill had two obvious needle puncture marks over her right median cubital vein as well. I took photographs of Hill's body with and without the blanket. I did not move her.

Other than the injuries listed above I saw no injuries on the body of Hill. I noted that her eyes appeared to be sunken and dark, which can sometimes be a sign of dehydration. The darkening around the eyes was not consistent with head or facial trauma. I did not check Hill's skin turgor.

A radiographic scan image was visible on the computer in the room so I took a photograph of the image. It is unknown if this is a radiographic image of Hill or not.

Medicolegal Death Investigator N. Volpone arrived at SHMC at about 2040. Volpone took photographs of Hill's body as well.

I released Corrections Officers Petrie and Epley to return to the jail. They advised me they would be writing reports about the incident.

At about 2055 Johnathan Waldrop and Cory Clauson arrived to transport Hill's body to Holy Family Hospital for subsequent autopsy. Volpone and I had Waldrop roll Hill on her side and we took pictures of Hill's back. Once this was done Hill was placed into a body bag, which was sealed with a numbered tag, and removed from the scene.

I had read Hill's booking inmate summary while waiting. I also called Det. Mitchell and advised him of the circumstances of Cambrie Bishops death in the jail, for which I had not yet received an autopsy report, so he could look for any similarities in this case.

I know that inmates housed in a correctional facility, such as the Spokane County Jail may have access to illicit drugs brought in but do not have access to injection devises and / or pipes to smoke it. Because of this limitation inmates often mix the drugs with liquid and drink them, or crush the drugs and snort them. I asked N. Volpone that in addition to the normal processing of the body at autopsy, to have the medical examiner take swabs of Hills nostrils.

When Hill was removed from the hospital I drove to the Spokane County Jail and was let up to the second floor, 2 W 27, where Det. Mitchell and F.T. Micke were in the process of searching the cell. I spoke briefly with Corrections Officer Milholland who had found Hill unresponsive alone in cell 2 W 27. Det. Knight

REPORTING OFFICER

59918 Drapeau

DATE

08/29/2018

REVIEWED BY

Rosenthal, Jack R

08/29/2018



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE (continuation)

interviewed the occupants of the adjacent cells, 2 W 26 and 2 W 28.

I assisted Det. Mitchel with the search. I searched the top bunk and found only court papers for Cindy Lou Hill. I checked the white substance in the bottom of the toilet by reaching in and flipping it up so it floated in the bowl. I found this to be toilet paper and not pill residue or binder.

I was advised that, prior to being brought to 2 W 27 for a medical watch, Hill had been in cell 3 W 04 with a cell mate named Kimberly McNicol. When Det. Mitchell was finished with the search of 2 W 27 he and I went up to 3 W 04 to interview McNicol. I told McNicol that we were interviewing people because Cindy Lou Hill had died from unknown causes. I recorded the interview which began at about 2315. I advised McNicol we were recording the interview.

McNicol said Hill came into the jail about four days ago. Hill was moaning all the time, complaining about being hot and vomiting. McNicol assumed Hill was detoxing from heroin, because she has seen people do this before. Hill vomiting and her vomit was yellow. When Hill's vomit turned greenish-black McNicol got told of the guards and nursing staff about it. Staff came in to check on Hill and took Hill out to the second floor. I asked McNicol if Hill was worse when she left for the second floor or the same. McNicol said she could not say. McNicol said Hill did not eat anything while they were in the same cell. McNicol once tried to give Hill some milk but Hill threw it up.

McNicol said Hill stayed in the cell, even during out time and went out of the cell to go to court once. McNicol said one of the times staff came in McNicol asked if Hill might have an appendicitis.

I asked McNicol if there was any chance Hill got some drugs from another inmate. She said Hill did not get any drugs from any inmate but the jail staff did give her some Gatorade and water from the staff. McNicol said Hill was with her for her whole stay at the jail until she left downstairs after breakfast, at 0600 or 0700. I asked McNicol how she found out Hill had died, since she did not seem surprised when I told her. She told me she could feel it, but no one had told her until I did.

I ended the interview with McNicol at about 2325.

I went with Det. Mitchell to the property room and we placed on evidence from the cell together. I then went home.

On 08-26-18 at about 0100 I received another call from Sgt. Bloomer advising me that the inmate in 2 W 28 had had some kind of medical emergency. CPR had been administered and the inmate, Kristi Freeman, had been transported to Deaconess Medical Center. I responded with Det. Mitchell to this incident as well. See

REPORTING OFFICER

59918 Drapeau

DATE

08/29/2018

REVIEWED BY

Rosenthal, Jack R

08/29/2018



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE (continuation)

Spokane County report number 2018-10119234.

On 08-27-18 at about 1200 I received a call from Spokane County Medical Examiner Dr. Sally Aiken. She told me that while toxicological and microscopic examinations were still to be completed she felt that Cindy Lou Hill's death had been the result of Peritonitis which had begun from a hole in the upper intestine near the Duodenum. I know that peritonitis is consistent with physical signs and complaints of Cindy Lou Hill during her time in the jail. Dr. Aiken also asked me to come to the property generated by the autopsy. I drove to the autopsy suite at Holy Family Hospital and met with Dr. Aiken and Autopsy Assistant F. Calderon. Calderon gave me the items collected at the autopsy of Cindy Lou Hill and I signed for the items on the Medical Examiner's Chain of Custody form. I took these items to the Spokane County Property Facility and placed them on property as evidence.

On 08-27-18 I met with Jail Sgt. Hill who gave me a DVD containing Cindy Lou Hill's jail medical records from NaphCare, who is contracted to do medical evaluation and treatment in the Spokane County Jail. The records are 185 pages long. I reviewed the records and uploaded the digital records directly to the records management system.

It appears that during her most recent stay Hill had be prescribed Albuterol Sulfate Inhalation, Aluminum-Magnesium-Simethicone, Ondansetron, Ibuprofen, Loperamide, Dicyclomine HCL, and Clonidine HCL. Included in the medical records was an Administration Log that showed Hill had been administered two doses of Ondansetron, two doses of Ibuprofen, two doses of Clonidine, and one dose of Dicyclomine on 08-23-18 prior to 1038, which is the last medication listed as administered. Hill had also been prescribed cool fluids or electrolyte solution if alert.

According to the records, Cindy Lou Hill had vital signs taken on 08-25-18 at 1248. Here vitals were as follows: BP 130/86; pulse 78; respirations 16; O2 sat 95.

There is a Progress note listed for Hill on 08-25-18 at 1245 which reads; "Patient placed on 30" medical watch for severe abdominal pain and having to be dragged to door by cellmate to be assessed. Patient refused to get up or walk to door, screaming and repeating 'I'm sick' over and over. CO Torosian notified."

I received and reviewed the patrol report written by Deputy Urrutia-Soto and reports written by the following Corrections Officers; Milholland, J. White, T. Titchenal, N. Strege, E. Bocook, and N. Petrie. I received and reviewed a Cell Assignment History printout for Cindy Lou Hill. This showed intake on 08-21-18 at 1206, 2 W 05 for Classification Housing on 08-21-18 at 1422, then 3 W 04 on 08-21-18 at 1900, and then 2 W 27 on 08-25-18 at 0913 and "moved per medical."

REPORTING OFFICER

59918 Drapeau

DATE

08/29/2018

REVIEWED BY

Rosenthal, Jack R

08/29/2018



SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE (continuation)

I checked the jail call log and records, to which I have access. I found Cindy Hill's PIN number for calls to be 4127473. I found calls made by this PIN during the current jail stay.

I certify under the penalty of perjury under the laws of the State of Washington that all statements made herein are true and accurate and that I have entered my authorized user ID and password to authenticate it. Place Signed: Spokane County WA

REPORTING OFFICER	DATE	REVIEWED BY	
59918 Drapeau	08/29/2018	Rosenthal, Jack R	08/29/2018

**SPOKANE COUNTY SHERIFF**CASE# **2018-10119070****FIELD CASE SUPPLEMENT**

EVENT	REPORTED DATE/TIME 11/19/2018	OCCURRED INCIDENT TYPE	LOCATION OF OCCURRENCE
	OCCURRED FROM DATE/TIME	OCCURRED THRU DATE/TIME	

OFFENSES	STATUTE/DESCRIPTION	COUNTS	ATTEMPT/COMMIT

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

ASSOCIATED CASES		
2018-	2018-	2018-
2018-	2018-	2018-

REPORTING OFFICER 59918 Drapeau	DATE 11/19/2018	REVIEWED BY Rosenthal, Jack R	11/19/2018
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SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE

On about 11-13-18 I heard from Spokane County Medical Examiner Dr. Aiken. She advised me that the autopsy toxicology had returned for Cindy Lou Hill. She advised me there were indications of Narcan / Naloxone in the findings and asked me if the jail staff had administered this drug during treatment. I called Jail Sgt. Tom Hill and he told me the jail based Naphcare staff had administered Narcan during the initial response. I asked Sgt. Hill for the name of the provider who administered the Narcan and the dosage provided. Sgt. Hill said he would check with the staff and get back to me. I called Dr. Aiken and advised her.

Based on my training and experience as an Emergency Medical Technician I know that Nacan / Naloxone is a medication given to counteract Opioid overdose and would be an appropriate medication to administer in a case similar to that of Cindy Lou Hill.

On 11-15-18 I received word from Sgt. Hill that Naphcare Registered Nurse (RN) Mike Kallsen had administered four Milligrams of Narcan to Cindy Lou Hill during her initial care. I relayed this information to Dr. Aiken.

I certify under the penalty of perjury under the laws of the State of Washington that all statements made herein are true and accurate and that I have entered my authorized user ID and password to authenticate it. Place Signed: Spokane County WA

REPORTING OFFICER

59918 Drapeau

DATE

11/19/2018

REVIEWED BY

Rosenthal, Jack R

11/19/2018

2 OF 2

**SPOKANE COUNTY SHERIFF**CASE# **2018-10119070****FIELD CASE SUPPLEMENT**

EVENT	REPORTED DATE/TIME 03/06/2019	OCCURRED INCIDENT TYPE	LOCATION OF OCCURRENCE
	OCCURRED FROM DATE/TIME	OCCURRED THRU DATE/TIME	

OFFENSES	STATUTE/DESCRIPTION	COUNTS	ATTEMPT/COMMIT

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

SUBJECT	JACKET/SUBJECT TYPE	NAME (LAST, FIRST, MIDDLE SUFFIX)					NON-DISCLOSURE
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP)				
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE	
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3			

ASSOCIATED CASES		
2019-	2019-	2019-
2019-	2019-	2019-

REPORTING OFFICER 59918 Drapeau	DATE 03/06/2019	REVIEWED BY Rosenthal, Jack R	03/07/2019
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SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE

On 03-06-19 at about 0835 I sent an e-mail request to the Spokane County Medical Examiner's Office requesting an Autopsy report for this case if completed.

On 03-06-19 at about 0919 I received an e-mail from the Medical Examiner's Office. Attached to this e-mail was a secured document with the completed autopsy report on Cindy Lou Hill. The report was signed by Dr. Sally Aiken on 11-09-18. I reviewed the autopsy report. The report states: "The death [of Cindy Lou Hill] is attributed to acute bacterial peritonitis due to ruptured duodenal-liver adhesion with perforation of duodenum." It also states: "the manner of death is natural."

I scanned the autopsy report and uploaded it to the records management system.

This case is closed with no further law enforcement action required.

I certify under the penalty of perjury under the laws of the State of Washington that all statements made herein are true and accurate and that I have entered my authorized user ID and password to authenticate it. Place Signed: Spokane County WA

REPORTING OFFICER

59918 Drapeau

DATE

03/06/2019

REVIEWED BY

Rosenthal, Jack R

03/07/2019

2 OF 2

**SPOKANE COUNTY SHERIFF**

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

EVENT	REPORTED DATE/TIME 08/25/2018	OCCURRED INCIDENT TYPE	LOCATION OF OCCURRENCE
	OCCURRED FROM DATE/TIME	OCCURRED THRU DATE/TIME	

OFFENSES	STATUTE/DESCRIPTION	COUNTS	ATTEMPT/COMMIT

SUBJECT	JACKET/SUBJECT TYPE Adult Person	NAME (LAST, FIRST, MIDDLE SUFFIX) Thommes, Adrienne S		NON-DISCLOSURE N		
	DOB [REDACTED]	AGE or AGE RANGE 40	ADDRESS (STREET, CITY, STATE, ZIP) 1100 W mallon AVE 2W26 spokane,			
	RACE White	SEX Female	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3		

SUBJECT	JACKET/SUBJECT TYPE Adult Person	NAME (LAST, FIRST, MIDDLE SUFFIX) calvey, Kathryn R		NON-DISCLOSURE N		
	DOB [REDACTED]	AGE or AGE RANGE 28	ADDRESS (STREET, CITY, STATE, ZIP) 1100 W mallon AVE 2W25 spokane, WA			
	RACE White	SEX Female	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	DL NUMBER/STATE	PRIMARY PHONE	PHONE #2	PHONE #3		

SUBJECT	JACKET/SUBJECT TYPE Officer Person	NAME (LAST, FIRST, MIDDLE SUFFIX) Knight, Roger		NON-DISCLOSURE N		
	DOB	AGE or AGE RANGE	ADDRESS (STREET, CITY, STATE, ZIP) 12710 E Sprague AVE Spokane Valley, WA			
	RACE	SEX	HEIGHT or RANGE	WEIGHT or RANGE	HAIR	EYE
	DL NUMBER/STATE	PRIMARY PHONE (509)477-3339	PHONE #2	PHONE #3		

REPORTING OFFICER 59453 Knight	DATE 08/25/2018	REVIEWED BY Bloomer, Patrick L	09/04/2018
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SPOKANE COUNTY SHERIFF

CASE# 2018-10119070

FIELD CASE SUPPLEMENT

NARRATIVE

08/25/18 around 1830, Sgt Bloomer requested I respond as the on-call property crimes detective to the Spokane County Jail to assist with in in custody death investigation.

I drove to the Spokane County Jail where I contacted Sgt Bloomer. We stood by until the arrival of Det Mitchell and forensics personnel.

We were taken to 2nd floor west wing, unit 2W27. I was directed to interview inmates on the floor in the immediate area of 2W27.

I attempted to speak with the female in 2W28. The female was alone in her cell and was completely unresponsive to verbal stimulus. Prior to my entry, corrections staff told me the female was removing clothing. I entered the cell and found the she was partially clothed and would not respond in to me in any manner. She was walking around until she was directed by corrections staff to come speak with me. She was wearing only her blouse and had removed her pants and underwear. I activated my tape recorder as I attempted to interview her. She remained silent and would not respond in any manner to me. Corrections staff told me they would include the name of the female in 2W28 in their reports. I looked in on her before leaving and saw she was lying on her bed wearing only her underpants.

I contacted the female in 2W26. She identified herself as Adrienne Thommes. Thommes said she had been in her cell for three days. Thommes expressed confusion about who she had been communicating with. When her cell door was open, Thommes was on the floor speaking to the female in 2W25. Thommes said she thought she was communicating with the female in 2W27. Thommes then said she knew the female in 2W27 was dead and her spirit was inhabiting her uterus. I clarified for Thommes who she was speaking with and asked again if she had any communications with the female in 2W27. Thommes said she thought the female in 2W27 had been singing Amazing Grace yesterday, but she was not sure. Thommes said she had no communications with the female in 2W27. I recorded my conversation with Thommes.

I contacted the female in 2W25 who identified herself as Kathryne Calvey. Calvey told me she had no contact with the female in 2W27. I recorded Calvey's statement.

I stood by outside 2W27 as the cell was examined by forensics and Det Mitchell.

I cleared the jail at 2210 hours.

I certify under the penalty of perjury under the laws of the State of Washington that all statements made herein are true and accurate and that I have entered my authorized user ID and password to authenticate it. Place Signed: Spokane County WA

REPORTING OFFICER
59453 Knight

DATE
08/25/2018

REVIEWED BY
Bloomer, Patrick L

09/04/2018



FORENSIC UNIT
SPOKANE COUNTY SHERIFF
1100 W Mallon Ave
Spokane, WA 99260
Ph: 509-477-2334
Fx: 509-477-6819

CRIME SCENE REPORT

SUBMITTING AGENCY SCSO		CROSS REFERENCE NUMBER(S)		SUBMITTING AGENCY CASE NUMBER 2018-10119070	
SUBMITTING DETECTIVE/OFFICER Detective J. Mitchell and Detective R. Knight				UNIQUE# 343	
INCIDENT TYPE Death Investigation				KEY# 18-08-0953	
INCIDENT LOCATION 1100 W. Mallon (Jail 2W27)					
INCIDENT DATE (MONTH - DAY - YEAR) 08-25-2018		DATE OF RESPONSE			
		START DATE (MONTH - DAY - YEAR) 08-25-2018	START TIME 2020	END DATE (MONTH - DAY - YEAR) 08-25-2018	END TIME 2205

RESPONSE REQUESTED

Scene at 1100 W. Mallon - Jail Cell 2W27.

RESULTS

At the request of Sergeant P. Bloomer, S. Micke responded to the above listed address to assist in the processing of jail cell 2W27 at the Spokane County Jail. Upon arrival, S. Micke was met by Detectives J. Mitchell and R. Knight and briefed on the scene. S. Micke began overall and specific photographic documentation followed by evidence search and collection.

Overall photographs were taken of: exterior and interior of jail cell and items found within the cell. Specific photographs were taken of: toilet paper roll in middle of floor, strand of toilet paper outside cell door, substance from floor, before and after collection, liquid in cup, before and after collection, unraveled toilet paper roll from under bunk, paperwork found in cell, writing under bunks, substance in toilet, and writing in Bible. For more specific details see photo descriptions in CaseGuard. A total of 115 photographs were taken.

Utilizing a sterile scalpel and specimen cup, S. Micke collected the liquid and substance from the floor, underneath the clothing. The scalpel was also retained. Utilizing a sterile specimen cup, S. Micke collected a portion of the liquid from the Styrofoam cup, which was on the shelf. Photographs were taken before and after collection of each sample.

With the exception of digital media, all evidence was retained by detectives. Digital media remains on file in the Forensic Unit.

S. Micke
Forensic Technician

9-12-18 M
Date of Issue



FORENSIC UNIT
SPOKANE COUNTY SHERIFF
1100 W Mallon Ave
Spokane, WA 99260
Ph: 509-477-2334
Fx: 509-477-6819

FRICTION RIDGE COMPARISON/ABIS REPORT

SUBMITTING AGENCY SCSO		CROSS REFERENCE NUMBER(S)		SUBMITTING AGENCY CASE NUMBER 2018-10119070	
SUBMITTING DETECTIVE/OFFICER Medical Examiner's Office				UNIQUE# N/A	
INCIDENT TYPE Death Investigation				KEY# 18-08-0953	
INCIDENT LOCATION Holy Family Hospital (Autopsy)					
INCIDENT DATE (MONTH - DAY - YEAR) 08-25-18		DATE OF REQUEST (MONTH - DAY - YEAR) List for the week of 08-27-18		EXAM START DATE (MONTH - DAY - YEAR) 09-18-18	
				EXAM END DATE (MONTH - DAY - YEAR) 09-25-18	

EXAMINATION REQUESTED

Comparison of prints taken at autopsy of Hill, Cindy, DOB [REDACTED], Autopsy#18-2954 to those on file to confirm identity.

RESULTS

A fingerprint record was located belonging to Hill, Cindy Lou, CID#412473, SID#WA12042586, FBI#175587JA4.

A friction ridge comparison was conducted between the prints listed above and it is my conclusion that the two impressions came from the **same source**.

L. Miller

Examination Performed By
Lacey Miller

J. Brownfield

Technical Review Performed By
Julie Brownfield

09-25-18 JB

Date of Issue

**Spokane County Medical Examiner
Evidence Collection / Chain of Custody**

Name of Decedent: Hill, Cindy

Case No.: 18-2954

Found / Pronounced: 8/25/2018

Date of Autopsy: 08/27/2018

Prosecutor: Sally Aiken / John D. Howard

Assistant: am IFC

Evidence Collected At Autopsy:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Head Hair | <input checked="" type="checkbox"/> Anal Swabs and Slides |
| <input type="checkbox"/> Facial Hair | <input checked="" type="checkbox"/> Oral Swabs and Slides |
| <input checked="" type="checkbox"/> Pubic Hair | <input checked="" type="checkbox"/> Vaginal Swabs and Slides |
| <input checked="" type="checkbox"/> Fingernails - Right Hand | <input type="checkbox"/> Cervical Swabs and Slides |
| <input checked="" type="checkbox"/> Fingernails - Left Hand | <input checked="" type="checkbox"/> Vaginal Wash |
| <input type="checkbox"/> Pubic Combing | <input checked="" type="checkbox"/> Blood Card |
| <input type="checkbox"/> Clothing and Personal Effects | <input type="checkbox"/> Paper Bags |
| (see "Clothing and Personal Effects" form) | <input type="checkbox"/> Body Bag |
| <input checked="" type="checkbox"/> Other | <input type="checkbox"/> Fingerprint Card |

Bullets, Wadding, Shot Cup, Location / Description

nasal swabs
white debris from legs

Submitted in Evidence:

To: [Signature] 915
By: Fernando Calderon
Date: 8/27/18

Agency: Spokane County S.D.
Agency: Spokane Co Medical Examiner's



Spokane County

WASHINGTON

OFFICE OF THE MEDICAL EXAMINER

MEDICAL EXAMINER
SALLY S. AIKEN, M.D.
FORENSIC PATHOLOGIST

MEDICAL EXAMINER
JOHN D. HOWARD, M.D.
FORENSIC PATHOLOGIST

AUTOPSY REPORT

AUTOPSY NO: **18-2954**
NAME OF DECEDENT: **HILL, CINDY**
DATE OF BIRTH: [REDACTED] SEX: FEMALE
DATE PRONOUNCED/FOUND: 08/25/2018
DATE OF AUTOPSY: 08/27/2018 @ 0945 HOURS
LOCATION: FORENSIC INSTITUTE @ HOLY FAMILY HOSPITAL;
SPOKANE, WA.
RESPONSIBLE PARTY: SPOKANE COUNTY MEDICAL EXAMINER'S OFFICE
PROSECUTOR: SALLY S. AIKEN, M.D.
ASS'T PROSECUTOR: FERNANDO CALDERON / EMILY MELTON

NOTICE: THIS REPORT IS CONFIDENTIAL IN THE STATE OF WASHINGTON

You are being given this report because you are named in the statute below as being authorized to have a copy of the autopsy or postmortem report, either of which may include other reports and records. These are highly confidential documents! You may not give or show any of these documents to anyone except as authorized by law.

RCW 68.50.105 Autopsies, postmortems - Reports and records confidential - Exceptions. (Effective January 1, 2014.) (1) Reports and records of autopsies or postmortems shall be confidential, except that the following persons may examine and obtain copies of any such report or record: The personal representative of the decedent as defined in RCW11.02.005, any family member, the attending physician or advanced registered nurse practitioner, the prosecuting attorney or law enforcement agencies having jurisdiction, public health officials, the department of labor and industries in cases in which it has an interest under RCW 68.50.103, or the secretary of the department of social and health services or his or her designee in cases being reviewed under RCW74.13.640. (2)(a) Notwithstanding the restrictions contained in this section regarding the dissemination of records and reports of autopsies or postmortems, nor the exemptions referenced under RCW42.56.240(1), nothing in this chapter prohibits a coroner, medical examiner, or his or her designee, from publicly discussing his or her findings as to any death subject to the jurisdiction of his or her office where actions of a law enforcement officer or corrections officer have been determined to be a proximate cause of the death, except as provided in (b) of this subsection. (b) A coroner, medical examiner, or his or her designee may not publicly discuss his or her findings outside of formal court or inquest proceedings if there is a pending or active criminal or civil action, concerning a death that has commenced prior to January 1, 2014. (3) The coroner, the medical examiner, or the attending physician shall, upon request, meet with the family of the decedent to discuss the findings of the autopsy or postmortem. For purposes of this selection, the term "family" means the surviving spouse, state registered domestic partner, or any child, parent, grandparent, grandchild, brother, or sister of the decedent, or any person who was guardian of the decedent at the time of death. [2013 c 295 § 1:2011 c 61 § 1. Prior:2007 c 439 § 1; 2007 c 156 § 23; 1987 c 331 § 58; 1985 c 300 § 1; 1977 c 79 § 2; 1953 c 188 § 9. Formerly RCW 68.08.105]



Website: <http://www.spokanecounty.org/medexaminer/>

5901 North Lidgerwood, Suite 24 B Spokane, Washington 99208 (509) 477-2296 FAX: (509) 477-6327

AUTOPSY NO: **18-2954**
DECEASED: **HILL, CINDY**
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SUMMARY OF CASE FINDINGS

- I. ACUTE BACTERIAL PERITONITIS DUE TO RUPTURED DUODENAL-LIVER ADHESIONS WITH PERFORATION OF DUODENUM:
 - A. 600 cc OF TURBID INTRA-ABDOMINAL FLUID
 - B. DUODENAL DEFECT MEASURING 1.2 CM WITH SURROUNDING LYSED ADHESIONS COVERING AN AREA MEASURING 6 CM
 - C. UNDER-SURFACE OF LIVER SHOWING LYSED ADHESION (MICROSCOPIC EXAMINATION: PIGMENT-LADEN MACROPHAGES AND NECROSIS OF SURFACE LIVER CELLS)
 - D. MICROSCOPIC EXAMINATION OF LARGE BOWEL GRAM STAIN SHOWING GRAM-POSITIVE RODS
 - E. PERITONEAL CULTURE RESULT: NEGATIVE EXCEPT FOR STAPHYLOCOCCUS COAGULASE NEGATIVE (PROBABLE CONTAMINANT)
 - F. PERICARDIAL CULTURE RESULT: NO GROWTH, NO ANAEROBES ISOLATED
- II. VITREOUS HUMOR SHOWING NO EVIDENCE OF DEHYDRATION (LAB PROVIDENCE HOLY FAMILY HOSPITAL): Sodium = 140 Nmol/L, Glucose = 95 mg/dL, Creatinine = 0.9% mg/dL, Urea Nitrogen = 25 mg/dL
- III. NO SIGNIFICANT EXTERNAL EVIDENCE OF INJURY, AND NO INTERNAL EVIDENCE OF INJURY
- IV. TOXICOLOGY: SEE SEPARATE REPORT

OPINION:

This 55-year-old female was booked into the Spokane County Jail on 8/21/18, and was under a medical watch for opioid withdrawal. She had a cellmate until the day of death, 8/25/2018, when she was moved into a single cell. The cellmate said that the decedent had been sick with vomiting, moaning and complaining of being hot. Jail medical staff noted the decedent had complained of abdominal pain.

On the fourth day of her incarceration, after the decedent had been moved into a single-occupancy cell, she was found unresponsive in her cell by jail staff. She was removed from her cell, and resuscitation was attempted. She was transported to a local hospital, but died in the Emergency Department.

The death is attributed to acute bacterial peritonitis due to ruptured duodenal-liver adhesions with perforation of duodenum.

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Investigation by the Spokane Sheriff's Department revealed no evidence of traumatic injury or of assault during this incarceration. It is possible that the vomiting of opioid withdrawal resulted in lysis of the adhesions. The source of the adhesions is not clear, but the decedent had remote cholecystectomy. Because of these considerations, the manner of death is natural.

Dual toxicologic testing was performed by the Washington State Toxicology Laboratory and by National Medical Services Laboratories. The Washington State Toxicology testing was negative. NMS testing was positive for Naloxone (Narcan) administered during resuscitation, and for methamphetamine and methamphetamine metabolite (amphetamine). NMS quantitated methamphetamine and amphetamine in low concentrations, just above laboratory reporting limits, likely accounting for intra-laboratory differences. Methamphetamine has a long half-life and this low concentration is consistent with use prior to incarceration.

Sally S. Aiken MD, 11/9/18
Sally S. Aiken, M.D. (date signed)
Forensic Pathologist

SSA/pke
Dt:11/08/2018

Reviewed By:
<u>John D. Howard</u> <u>11-13-2018</u>
John D. Howard, M.D. Date Signed

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BACKGROUND INFORMATION:

The decedent is a 55-year-old female, who apparently was found unresponsive in her jail cell at "1725" hours. CPR was begun immediately, and she was transported to Providence Sacred Heart Medical Center, but died in the Emergency Department. She was the only inmate housed in the cell. Her medical history is notable for hypertension, and alcohol abuse. An autopsy is authorized for further investigation of the death.

IDENTIFICATION:

The body is found in a body pouch sealed by tag number "0316980." The decedent's name and this tag number are written on the body pouch, along with the date "8-25-18." Around the right ankle is a morgue band bearing the decedent's name, the date "8-25-18," and the correct tag number. Subsequent to autopsy, identity is confirmed by friction ridge (fingerprint) comparison.

EVIDENCE OF MEDICAL INTERVENTION:

1. An intraosseous catheter on the right tibia, secured with a blue and white endotracheal tube holder, which has straps encircling the right calf.
2. Encircling the right wrist is a hospital identification band, name "HILL, CINDY LOU."
3. A cardioversion pad on the upper aspect of the right breast, with a second pad in the left anterior axillary line.
4. Circular EKG lead pads, one on each side of the lower abdomen, and two on the upper chest.
5. An endotracheal tube in the mouth, secured with an endotracheal tube holder which has large waxy pads over the cheeks, and a Velcro strap encircling the neck.
6. A pulse oximeter lead on the left index finger.
7. Found overlying the sternum is a circular puncture wound, presumed to be from placement of an intravascular catheter open to air, an intraosseous catheter, or a needle which extended into the pericardial sac. Also, adjacent to this, continuing to the left parasternal margin is a 1-1/2 inch area of green ecchymosis, from chest compressions.

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8. A butterfly catheter positioned on the dorsum of the left hand and secured with clear dressing and tape. Attached to this is a "Y"-port.
9. A needle puncture wound on the ventral surface of the left forearm, covered with folded gauze, secured with tape.

EXAMINATION OF THE HANDS:

When the body is initially examined, the hands are not covered with paper bags. There is a band-aid on the right ring finger. Deep to this band-aid is what appears to be a needle puncture wound. The fingernails are dirty for the most-part, and have rounded ends which overhang by up to 1/8 inch. There is brown debris at the nail beds. Some of the fingernails on the right are coated with bits of red and sparkly silver nail polish.

The left hand fingernails are also dirty and have similar overhang. They are also covered with bits of red nail polish. Dark red to brown debris is found at the proximal nail beds at the left hand also. The fingernail overhang is the same.

CLOTHING:

This item of clothing is found on the body:

1. A pair of orange cotton panties, bikini-cut. These have a white waistband and are labeled "8" in permanent ink along the left side. The waistband has been turned inward on the right side of the body. There is some dark, almost black fecal soiling of the crotch of this garment. The inner label of the garment says size "8."

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EXTERNAL EXAMINATION:

The body is that of a thin, white female whose general appearance is consistent with her age, recorded as 55-years. The body is well-preserved, except for the greenish discoloration at the left parasternal margin. It is cold to the touch, and has been refrigerated. There is cold coagulation of the abdomen. Rigidity is marked and symmetrical in the upper and lower extremities and there is marked jaw rigidity, though the jaw remains in a semi-open position because of the endotracheal tube. Lividity is dorsal, pink, and fixed. The body measures 62-3/4 inches and weighs 123 pounds.

When the body is initially examined, red blood stains are seen on the right pretibia.

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This is in the vicinity of the intraosseous catheter. A small amount of white material is also seen on the right pretibia, and white chalky material is found over the medial left patella and left distal thigh. This is swabbed.

The scalp is covered with dark-brown, curly hair measuring to 3-1/2 inches from the roots to the ends anteriorly, and is 7 inches from the roots to the ends posteriorly. Found loosely attached to the hair is a bright blue, covered rubber band. The eyebrows are dark-brown and have been extensively plucked and trimmed. The eyelashes are long and dark-brown. Delicate white hairs are found over the cheeks. On the tip of the chin is black and white, sparse stubble measuring to 1/8 inch. The body hair is dark brown and present in a normal adult female distribution, with stubble over the pubic area measuring to 3/4 inch, stubble over the lower extremities, and stubble in the axillae measuring to 1/4 inch.

The ears are well-formed and symmetrically placed with creases in the ear lobules and single pierced ear holes. The forehead is furrowed. The irides appear dark in color, with some clouding of the corneas and arcus senilis. The sclerae have slight icterus. The conjunctival surfaces of the eyelids are congested, but there are no conjunctival petechiae. Skin turgor is normal. A few telangiectasias are scattered over the cheeks. The nose is aligned normally and on the bridge of the nose is a horizontal, delicate, 3/4 inch long scar. There are no injuries to the lips. The teeth are natural and somewhat discolored and grey-brown. A few divot-like defects are found on several of the upper incisor teeth, appearing remote. There is crowding of the teeth in the lower mouth. The oral mucosa is pale and the frenula are intact. No intraoral petechiae are seen.

The trachea is midline and there are no injuries to the neck. The chest is symmetrical. The body overall is tanned, sparing the bathing suit area. Scattered adjacent to the sternal notch are multiple circular scars on the order of 1/8 inch. The arms also have solar tanning.

The upper extremities are aligned normally. A possible single needle puncture wound is found in the right antecubital crease. There are no injuries to the right upper extremity, and no injuries to the hand.

The left upper extremity has a navy-colored, nonprofessional-looking tattoo of a sort of starburst, 1-1/2 inches in dimension. Dried red-brown blood is seen on the lateral left triceps muscle, when the body is initially examined. The left antecubital crease has two needle puncture wounds. Found on the ventral surface of the left forearm are a total of ten violaceous scars, measuring to 3/8 inch, most of them horizontally oriented. The dorsum of the left forearm has two closely spaced scabs, each 1/8 inch in dimension. The dorsum of the left forearm also has a total of three scars, measuring to 3/4 inch. On the medial side of the left forearm is a purple to blue ecchymosis, 2-1/2 x 2 inches in dimension, with central needle puncture wounds.

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On the dorsum of the medial left wrist are two scars measuring to 1/2 inch.

The abdomen is firm, with cold coagulation. On the upper umbilicus is a horizontal 1 inch long scar. Crossing the suprapubic area is a horizontal 5 inch long scar, and on the left lower quadrant of the abdomen is another scar, this one linear and 1/2 inch. The external genitalia are those of a normal-appearing female. There are no introital injuries. The vagina is examined via speculum, and there are no vaginal injuries. The cervix is flat, and the cervical os is non-parous, measuring 4 mm.

The lower extremities are aligned normally. There are no significant injuries to the lower extremities. A few scars are scattered over the left patella. On the dorsum of the left great toe is a 3 mm ulcer, covered with some granulation tissue, bright red in color. The toenails are coated with sparkly red, clear, and silvery nail polish. Located medial to the right pretibia are two scars measuring to 1 inch. The soles of the feet are callused and dirty. A few violaceous, raised skin lesions are seen on the right upper hip, covering a 1-1/2 inch area.

A second examination of the back again reveals no injuries. The vertebral column is aligned normally. Some debris is attached to the right calf, appearing to be a few flecks of dirt. The anus is dilated postmortem. There is an anal tag from 10 o'clock to 1 o'clock. There are no anal or perianal injuries. The anal vault contains green stool. Scattered over the right buttock are a few tiny pustules.

No needle tracks or tattoos are seen.

INTERNAL EVIDENCE OF INJURY:

1. On the anterior subgaleum, a 3 cm area of purple subgaleal hemorrhage. Examination of the scalp overlying this demonstrates no injuries. There are no injuries to the skull or brain.

INTERNAL EVIDENCE OF MEDICAL INTERVENTION:

1. The needle puncture wound over the sternum appears shallow.
2. The endotracheal tube is appropriately positioned in the trachea.
3. Fracture of the mid-body of the sternum with no associated hemorrhage. There are fractures of right anterior-lateral ribs #2-7 and left anterior-lateral ribs #2-7. These are in the same vertical planes and are consistent with chest compressions of cardiopulmonary resuscitation.

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Most of the rib fractures have no surrounding hemorrhage, but fractures of the first few ribs superiorly have scant amounts of surrounding hemorrhage.

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INTERNAL EXAMINATION:

HEAD: Reflection of the scalp shows the single area of subgaleal hemorrhage. The calvarium is intact. Removal of the calvarium shows the epidural space to be normal. Likewise, no collections of subdural blood are present. The brain is removed in the usual manner and weighs 1125 grams. The leptomeninges are smooth and glistening and the gyri demonstrate their usual orientation and configuration. The vessels at the base of the brain are normally disposed and no anomalies are identified. Serial sections of the brain show the cerebral cortical ribbon to be intact. The usual anatomical landmarks of the cerebrum, midbrain, cerebellum, pons, and medulla demonstrate no abnormalities. Removal of the dura from the base of the skull shows the usual anatomical features without abnormalities. The pituitary fossa is unremarkable. The foramen magnum demonstrates the normal orientation and the first portion of the spinal cord at the level of the transection viewed through the foramen magnum is unremarkable.

NECK ORGANS: No hemorrhage is present in the prevertebral space and careful palpation of the cervical spinal column demonstrates no fractures. A layered dissection of the remaining structures of the neck is performed. No hemorrhage is present in the musculature of the tongue or in the soft tissues of the anterior neck. The hyoid bone is small, but dense and fused symmetrically. The hyoid bone is intact, as are the thyroid cornua and remaining bony and cartilaginous structures of the neck. The tracheal mucosa is unremarkable.

BODY CAVITIES: The body cavities are opened in the usual manner. The pleural surfaces are smooth and glistening and the pericardium is unremarkable. There is acute peritonitis, further described below. The mediastinum and retroperitoneum show the usual anatomical features. The leaves of the diaphragm are intact. On the right hemidiaphragm is black-colored pigment, which appears to be from remote hemorrhage. The organs are anatomically disposed. There is no internal evidence of significant acute injury. The parietal pleura is stripped from the posterior aspect of both chest walls, again revealing no posterior rib fractures or injuries.

ORGAN SYSTEMS

CARDIOVASCULAR: The heart weighs 330 grams. Examination of the epicardium shows it to be intact. The chambers demonstrate their usual shape and configuration with no gross hypertrophy.

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The coronary arteries are normally disposed and there is no significant atherosclerosis. Cut surfaces of the myocardium show a normal color and no thickening of the ventricular walls is identified with the left ventricle measuring 1.3 cm and the right measuring 0.4 cm. The valves are intact with the usual anatomic relationships, and the atria are unremarkable. The AV node of the conduction system is retained. The aorta follows its usual course and the origins of the major vessels are normally disposed and unremarkable. The great vessels of the venous return are in their usual position and unremarkable.

RESPIRATORY SYSTEM: The larynx and trachea are empty, and are continuous in the usual manner with the primary, secondary and tertiary bronchi, which are also empty. The right and left lungs weigh 310 and 300 grams, respectively. The pleural surfaces have large streaks of dark black pigment. Cut surfaces show tan to pink parenchyma, which is somewhat rubbery and has superimposed dot-like area of pigment. There is no evidence of injury to the lungs, and no consolidation of the air spaces. The pulmonary vessels occupy their usual relationships without evidence of emboli.

HEPATOBIILIARY SYSTEM: The liver weighs 900 grams. On the undersurface (inferior aspect) of the right lobe of the liver, just lateral to the falciform ligament is a 3 cm area where the liver capsule has been stripped. Adjacent to this, in the liver capsule, there is some pigment. This is photographed, and appears to conform with the lysed adhesions resulting in the duodenal perforation described elsewhere. Cut surfaces of the liver show a tan parenchyma of normal density. There is abundant scar tissue in the gallbladder fossa, and the gallbladder is absent. Staples are seen in x-rays of the abdomen, typical of cholecystectomy. The biliary tree is otherwise normally disposed and no abnormalities are demonstrated.

LYMPHORETICULAR SYSTEM: The spleen weighs 70 grams with a smooth, glistening capsule and an unremarkable parenchyma with the usual anatomical features. The thymus is atrophic and replaced by fat. The lymph nodes, where noted, show no notable pathologic change.

URINARY SYSTEM: The right and left kidneys weigh 100 and 120 grams, respectively. The cortical surfaces on the left are smooth and glistening, but the right kidney has some broad-based scars. There is good preservation of the cortices and corticomedullary differentiation. The pelves show the usual anatomical relationships and are continuous into normal appearing ureters, which insert into an unremarkable bladder containing 10 cc of urine.

INTERNAL GENITALIA: The uterus occupies the usual position and is small. The cervix is non-parous. The cervix has a very flattened contour. The endometrium is thin and tan. There have been remote bilateral tubal interruptions which extend from near the uterus, for a length of several centimeters.

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The ovaries are senescent-appearing.

GASTROINTESTINAL TRACT: Upon opening the abdominal cavity it is noted that the decedent has peritonitis. The abdomen contains an estimated 600 cc of cloudy, thin, light-brown liquid. The peritoneal liquid is cultured. Loops of small bowel have erythema and attached fibrin. This is most prominent in loops of small bowel of the upper abdomen, extending also along the right pericolic gutter, such there is peritonitis surrounding the cecum. Fluid has pooled in the central abdomen and in both the right and left upper quadrants. The peritonitis is caused by a perforation of the anterior aspect of the duodenum, just distal to the pylorus. This duodenal defect is 1.2 cm, and has fairly smooth edges. Surrounding the defect on the anterior surface of the duodenum and extending to adjacent connective tissue is a discolored area, consistent with remote adhesions and hemorrhage. This discolored area is brown to yellow, and 6 cm in dimension, with spotty areas of black coloration from presumed hemosiderin. A mirror image of this zone of adhesion is found on the undersurface of the right lobe of the liver, as has been described. Sections of the duodenal perforation and surrounding lysed adhesions and old hemorrhage are submitted in cassette (5).

The pharynx and esophagus are unremarkable with no abnormalities identified. The stomach lies in a normal position and contains 300 cc of thin, brown liquid. The mucosal lining of the stomach is intact. The duodenal perforation is described elsewhere. The remaining small bowel has variable erythema of peritonitis and attached fibrin. The entire length of the small and large bowel is opened. Sections showing the peritonitis on the small bowel and on the peritoneal sidewall are submitted together in cassette (4). There are no foreign bodies in the small bowel, which mostly contains brown, fairly thin fecal matter. The entire large bowel is opened longitudinally and contains dark-colored fecal matter, not appearing to be melena. There are no foreign objects in the large bowel. The appendix is present and shows no evidence of appendicitis. The appendix was not photographed until 8/28/18 (due to caseload). The body cavity was re-opened. The appendix was identified on the previous opened cecum, and photographed. Sections of the appendix were submitted in (1x).

ENDOCRINE SYSTEM: The pituitary, thyroid, adrenals and pancreas show the usual anatomical features without evidence of natural disease or injury.

MUSCULOSKELETAL SYSTEM: No other fractures are identified and the skeletal muscle demonstrates the normal appearance. The bone marrow, where visualized, is unremarkable.

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MATERIALS TAKEN FOR TOXICOLOGY: Two peripheral blood samples are submitted to the Washington State Toxicology Laboratory. Toxicology results are reported separately.

TISSUE BIOPSY SPECIMENS TAKEN: Standard Collection (retained in fixative).

HISTOLOGY SECTIONS TAKEN: Standard Collection, plus peritoneum and loops of small bowel showing peritonitis in cassette (4), duodenum at perforation in cassette (5), along with liver site of perforation, and (1x) appendix.

WHOLE ORGANS RETAINED FOR FURTHER STUDY AFTER RELEASE OF THE BODY: None

PHOTOGRAPHS: Yes

X-RAYS: Yes; full-body, showing no evidence of traumatic injury (CPR rib fracture)

WITNESSES: None

SSA:pke
Dt:08/27/2018

MICROSCOPIC EXAMINATION:

HEART: (1) Slight autolysis. Focal myofiber hypertrophy and scattered contraction bands. Focal interstitial fibrosis.

LUNG: (2) Emphysematous changes, air/fat emboli. Abundant peribronchial black pigment. Changes of asthma, including basement membrane thickening and smooth muscle hypertrophy.

KIDNEY: (2) Autolysis, congestion. Scattered tubular microcalcifications.

LIVER: (1, 6) Minimal steatosis. Slight autolysis and congestion. Triads expanded by fibrous tissue.

LIVER SURFACE WHERE CAPSULE WAS STRIPPED: (6) Necrosis of surface liver cells with fibrosis and some pigment-laden macrophages. Some xanthochromatic pigment.

APPENDIX: (4) Normal appendix.

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DUODENUM AT AND NEAR PERFORATION SITE: (5) Some giant cells and pigment-laden macrophages on serosa in vicinity of defect. No polarizable foreign matter. At perforation site there are acute inflammatory cells that extend through serosa. Gram stain shows no bacteria, but some yeast.

SMALL BOWEL: (6) Serosa has polymorphoneutrophils, and fibrin. No bacteria are seen on serosa with gram stain.

LARGE BOWEL: (6) Early peritonitis with polymorphoneutrophils and bacteria on serosa. Gram stain confirm gram-positive rods.

UTERUS: (2) Decidualized endometrium with cystic atrophy.

THYROID (2) No pathologic abnormality.

PANCREAS: (1) Moderate autolysis, no pancreatitis, but small pseudocyst is seen.

ADRENAL: (1) Slight autolysis and congestion.

SPLEEN: (1) Congestion, slight autolysis.

BRAIN: (3 - cerebrum, cerebellum, hippocampus) Slight autolysis.

SSA:pke
Dt:11/08/2018

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RETENTION:

Blood, body fluids, tissues, organs (partial portions of routinely, or under some circumstances whole), and physical/trace materials collected (the exact samples vary by case as needed for diagnostic or evidentiary purposes, and by availability) during the examination are routinely held for a period of time after release of the body and will undergo biohazard disposal unless transferred to a laboratory or other agency, or otherwise released by special arrangement.

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Body Fluid/Organs, Evidence Retention Summary Chart

6 Months	Refrigerated – blood, urine, vitreous Frozen – gastric Frozen – liver
1 Year	Bullets Ligatures Other items of physical evidence Hair
3 Years	Frozen – red top Frozen – purple top
3 Years	Formalin fixed tissue including whole organs fixed in formalin
10 Years	Histology blocks
Indefinite	Microscopic slides
Indefinite or Archive	Fingerprint cards Blood cards

RCW 68.50.106

Autopsies, post-mortems – Analyses – Opinions – Evidence – Costs

In any case in which an autopsy or post-mortem is performed, the coroner or medical examiner, upon his/her own authority or upon the request of the prosecuting attorney or other law enforcement agency having jurisdiction, may make or cause to be made an analysis of the stomach contents, blood, or organs, or tissues of a deceased person and secure professional opinions thereon and retain or dispose of any specimens or organs of the deceased which in his/her discretion are desirable or needful for anatomic, bacteriological, chemical, or toxicological examination or upon lawful request are needed or desired for evidence to be presented in court. Costs shall be borne by the county.

[1993 c 228 § 19; 1987 c 331 § 59; 1975-'76 2nd ex.s. c 28 § 1; 1953 c 188 § 10. Formerly RCW 68.08.106]

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TOXICOLOGY LABORATORY
WASHINGTON STATE PATROL
2203 Airport Way South Suite 360 Seattle, WA 98134
(206) 262-6100 FAX No. (206) 262-6145



TOXICOLOGY TEST REPORT

Attention: Dr. Sally S Aiken
Agency: Spokane Co Medical Examiner
Address: N Spokane Professional Bldg
5901 N Lidgerwood Ste 24B
Spokane, WA 99208

Tox Case #: ST-18-10604 Case Type: Death Investigation Report Date: 11/2/2018

Agency Case #: 18-2954

Subject Name: Cindy Hill

Evidence: The following evidence was submitted to the Laboratory by Sally Aiken of the Spokane Co Medical Examiner on 8/30/2018 via USPS-1st Class Mail:
(1) ST-18-10604-A: VGray, Blood - Peripheral
(2) ST-18-10604-B: VGray, Blood - Peripheral

Volatile Analysis Results:

ST-18-10604-A: Blood - Peripheral

ST-18-10604-A was tested by Headspace - Gas Chromatography for the presence of acetone, ethanol, isopropanol, and methanol on 09/12/2018. The following result was obtained:

None Detected

Drug Analysis Results:

ST-18-10604-A: Blood - Peripheral

ST-18-10604-A was tested by Enzyme Multiplied Immunoassay Technique (EMIT) for the presence of amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine metabolite, and opiates on 09/07/2018. The following result(s) was obtained:

None Detected

ST-18-10604-A was tested by Gas Chromatography-Mass Spectrometry/Nitrogen Phosphorus Detector for the presence of basic drugs and metabolites on 09/12/2018. The following result(s) was obtained:

None Detected

ST-18-10604-A was tested by Liquid Chromatography/Tandem Mass Spectrometry for amphetamines on 10/16/2018. The following result(s) was obtained:

None detected

(test conducted by Naziha Nuwayhid, Forensic Scientist 3)

COMMENTS

All testing was performed by the Forensic Scientist listed below except as otherwise indicated. The Forensic Scientist has technically reviewed all relevant pages of testing documentation in the case record.

[R1.0-20160614]


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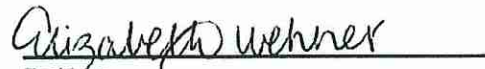
Request ID: ST-18-10604-0001

Reviewed & Aiken
11/7/18

Examined by:


David Nguyen
Forensic Scientist 3
Date: 11, 2, 2018

Reviewed by:


Reviewer
Date: 11, 3, 2018





NMS Labs

CONFIDENTIAL

3701 Welsh Road, PO Box 433A, Willow Grove, PA 18080-0437

Phone: (215) 657-4800 Fax: (215) 657-2972

e-mail: nms@nmslabs.com

Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

Toxicology Report

Report Issued 09/18/2018 14:01

60181
Pathology Assoc. Medical Labs
Attn: Sendouts
110 W. Cliff Drive
Spokane, WA 99204

Patient Name HILL, CINDY

Patient ID 18-2954 18175135

Chain 30220161

Age 55 Y

DOB [REDACTED]

Gender F

Workorder 18256725

Received 09/04/2018 14:46

Chain of custody documentation has been maintained for the analyses performed by NMS Labs.

Unless alternate arrangements are made by you, the remainder of the submitted specimens will be discarded six (6) weeks from the date of this report; and generated data will be discarded five (5) years from the date the analyses were performed.

Sample ID 18256725-001

Matrix Blood

Patient Name HILL, CINDY

Patient ID 18-2954 18175135

Container Type Gray Vial

Collect Dt/Tm Not Given

Source Central Blood

Approx Vol/Weight 4.85 mL

Receipt Notes None Entered

Analysis and Comments	Result	Units	Reporting Limit	Notes
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8052B Postmortem, Expanded, Blood (Forensic)

Analysis by Enzyme-Linked Immunosorbent Assay (ELISA)

Salicylates	None Detected	mcg/mL	120
Cannabinoids	None Detected	ng/mL	10
Barbiturates	None Detected	mcg/mL	0.040

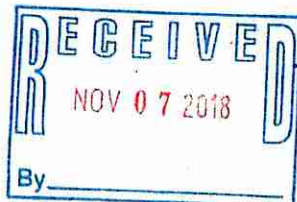
Analysis by Headspace Gas Chromatography (GC)

Ethanol	None Detected	mg/dL	10
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Synonym(s): Ethyl Alcohol

Ethyl alcohol (ethanol, drinking alcohol) is a central nervous system depressant and can cause effects such as impaired judgment, reduced alertness and impaired muscular coordination. Ethanol can also be a product of decomposition or degradation of biological samples.

Results for sample 18256725-001 are continued on next page



Reviewed & signed 11/7/18



NMS Labs

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3701 Welsh Road, PO Box 433A, Willow Grove, PA 19090-0437

Phone: (215) 657-4900 Fax: (215) 657-2972

e-mail: nms@nmmlabs.com

Robert A. Middleberg, PhD, F-ABFT, QABCC-TC, Laboratory Director

Sample ID 18256725-001

Collect DUTm Not Given

Matrix Blood

Source Central Blood

Patient Name HILL, CINDY

Patient ID 18-2954 18175135

Analysis and Comments	Result	Units	Reporting Limit	Notes
Blood Alcohol Concentration (BAC)	None Detected	g/100 mL	0.010	
Methanol	None Detected	mg/dL	5.0	
Synonym(s): Methyl Alcohol Endogenous blood levels of methanol from metabolic and dietary sources are approximately 0.15 mg/dL. Exposure to 800 ppm methanol for 8 hours produced a maximum average blood methanol concentration of 3.1 mg/dL.				
Isopropanol	None Detected	mg/dL	6.0	
Synonym(s): Isopropyl Alcohol Three workers exposed to 191 - 200 ppm isopropanol in air had blood isopropanol concentrations <1 mg/dL; acetone levels were 4 - 18 mg/dL during the exposure. After a sponge bath with isopropanol, one adult had a blood isopropanol concentration of 10 mg/dL. In a study of 31 isopropanol deaths, postmortem blood concentrations ranged from 10 to 250 mg/dL (mean, 140 mg/dL) and acetone blood concentrations ranged from 40 - 300 mg/dL (mean, 170 mg/dL).				
Acetone	None Detected	mg/dL	5.0	
Reported normal endogenous acetone levels in blood are up to 3 mg/dL. Levels associated with diabetic or fasting ketoacidosis range from 10 - 70 mg/dL. After exposure to 100 and 500 ppm acetone for 2 hr, reported blood acetone concentrations peaked at 2 and 10 mg/dL, respectively. A blood level of 250 mg/dL was reported in an individual who became lethargic following ingestion of acetone.				
Analysis by High Performance Liquid Chromatography/Time of Flight-Mass Spectrometry (LC/TOF-MS)				
Amphetamine	See Comment	ng/mL	10	
Synonym(s): Benzphetamine Metabolite Comment: Based on this screening result, confirmation testing was performed. Refer to the confirmation test result(s).				
Methamphetamine	See Comment	ng/mL	10	

Results for sample 18256725-001 are continued on next page

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11/7/18

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Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

Sample ID 18256725-001

Matrix Blood

Patient Name HILL, CINDY

Patient ID 18-2954 18175135

Collect D/Tm Not Given

Source Central Blood

Analysis and Comments	Result	Units	Reporting Limit	Notes
Synonym(s): Benzphetamine Metabolite				
Comment: Based on this screening result, confirmation testing was performed. Refer to the confirmation test result(s).				
Naloxone	Positive	ng/mL	1.0	
Synonym(s): Narcan®				
The reported qualitative result for this substance was based upon a single analysis only. If confirmation testing is required please contact the laboratory.				
Scope Statement	See Comment			
Comment: The following is a general list of compound classes included in this screen. The detection of any specific analyte is concentration-dependent. Note, not all known analytes in each specified compound class are included. Some specific analytes outside these classes are also included. For a detailed list of all analytes and reporting limits, please contact NMS Labs. Amphetamines, Anticonvulsants, Antidepressants, Antihistamines, Antipsychotic Agents, Benzodiazepines, CNS Stimulants, Cocaine and Metabolites, Hallucinogens, Hypnotics/Sedatives, Hypoglycemics, Muscle Relaxants, Non-Steroidal Anti-Inflammatory Agents, Opiates and Opioids.				
52485B Amphetamines Confirmation, Blood				
Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS)				
Ephedrine	None Detected	ng/mL	5.0	
A single 24 mg oral dose resulted in a peak plasma concentration of approximately 100 ng/mL.				
During chronic daily oral therapy with 15 mg (3 times daily), a plasma level of 85 ng/mL was reported at 4 hours, and 65 ng/mL at 6 hours after one 15 mg dose.				
Pseudoephedrine	None Detected	ng/mL	5.0	

Results for sample 18256725-001 are continued on next page

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Sample ID 18256725-001

Matrix Blood

Patient Name HILL, CINDY

Patient ID 18-2854 18175135

Collect D/Tm Not Given

Source Central Blood

Analysis and Comments	Result	Units	Reporting Limit	Notes
Following a 60 mg oral dose (immediate-release tablet or syrup), mean peak plasma concentrations of 180 to 360 ng/mL were reported at 3 hours.				
Following a 120 mg oral dose (controlled-release capsule), mean peak plasma concentrations of 285 to 315 ng/mL were reported.				
Chronic administration of 360 mg/day (of a controlled-release preparation) resulted in mean steady-state plasma concentrations between 500 and 640 ng/mL over a 10-day period.				
Phenylpropanolamine	None Detected	ng/mL	5.0	
Synonym(s): PPA; Noraphedrine				
Phenylpropanolamine is a drug as well as the metabolite of Ephedrine.				
Following a single 50 mg oral dose (immediate-release tablet), the mean peak plasma concentration was 180 ng/mL at 1 to 2 hours.				
Following a single 150 mg oral dose (sustained-release preparation), the mean peak plasma concentration was 280 ng/mL at 8 hours.				
Norpseudoephedrine	None Detected	ng/mL	5.0	
Synonym(s): Cathine				
Norpseudoephedrine is a metabolite of Pseudoephedrine.				
Amphetamine	13	ng/mL	5.0	
Amphetamine is a drug as well as the metabolite of Methamphetamine.				
Therapeutic Range (treatment of Narcolepsy or Attention Deficit Disorder) with doses between 10 and 30 mg daily; Mean peak plasma concentrations between 35 and 110 ng/mL.				
Phentermine	None Detected	ng/mL	5.0	
Synonym(s): Adipex-P®; Pro-Fast®; Ionamin®				

Results for sample 18256725-001 are continued on next page

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11/7/18



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Sample ID 18256725-001

Matrix Blood

Patient Name HILL, CINDY

Patient ID 18-2954 18175135

Collect DUTm Not Given

Source Central Blood

Analysis and Comments	Result	Units	Reporting Limit	Notes
<p>A single 26 mg/70 kg oral dose produced a mean peak blood concentration of 90 ng/mL at 4 hours, declining to 30 ng/mL after 40 hours.</p> <p>Adults receiving 30 mg daily oral doses for 2 weeks achieved a mean steady-state plasma concentration of 380 ng/mL (range 180 to 510 ng/mL).</p>				
Methamphetamine	5.1	ng/mL	5.0	
<p>Benzphetamine is rapidly metabolized to Amphetamine and Methamphetamine.</p> <p>This test reports Methamphetamine as the total of the undifferentiated d and l enantiomers. The ratio of these enantiomers is important in determining whether the source of Methamphetamine is from over the counter medications, prescribed medication or controlled substances.</p> <p>Call lab for further information on d to l enantiomer ratio determination.</p>				
MDA	None Detected	ng/mL	5.0	
<p>Synonym(s): 3,4-Methylenedioxymphetamine; Adam; MDMA Metabolite</p> <p>MDA is a metabolite of MDMA and methylenedioxyethylamphetamine (MDEA) and is abused for its central nervous system stimulant and hallucinogenic properties.</p> <p>The peak concentration of the MDA metabolite following a 110 mg dose of MDMA was reported as 28 ng/mL at 4 hours.</p> <p>The blood to plasma ratio of MDA is approximately 1.2 - 1.3</p>				
MDEA	None Detected	ng/mL	5.0	
<p>Synonym(s): 3,4-methylenedioxyethylamphetamine; Eve</p> <p>A single oral 140 mg dose given to 6 adults produced peak plasma concentrations that averaged 260 ng/mL at 2.2 hours.</p>				

Reviewed J. A. [Signature]
11/7/18



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Robert A. Middleberg, PhD, F-ABFT, DABCO-TC, Laboratory Director

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Workorder 18256725 was electronically
signed on 09/18/2018 13:07 by:

A handwritten signature in black ink, appearing to read "Erik Flail".

Erik Flail, B.A.
Certifying Scientist

Received & signed
11/7/18



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Incident Report

Incident #: 13245

Creator: Milholland, Matthew M

Date: 08/25/2018 19:09

Status: OPEN

Closed By:

Closed Date:

Cell:

Location:

Category

Critical Incident - Death

Force Used

Subjects

18013056 - HILL, CINDY LOU

Details

Creating Officer: Milholland, Matthew M Time: 08/25/2018 19:53 / Updating Officer: Milholland, Matthew M Time: 08/25/2018 19:53
At approximately 1624 hours on 08/25/18 I Officer Milholland 591263 was feeding dinner on 2 West when i came to 2w27 and Inmate Hill, Cindy Lou was laying on the floor inside the cell so I knocked on the door unital Inmate Hill responded "what" I stated that I had her dinner for her and that she needed to get up and grab it. she then stated "ugh" I took that as she didn't want to get up so I told her that I would just leave it on her food slot for her to grab.
I then continued to feed the rest of the module and was completing other needed tasks until 1724 hours when I was able to return to 2w27 and check on Inmate Hill to make sure she had eaten her dinner. I knocked on the door and got no response so, I called for medical Via the radio to come and check on her due to the fact that she was not responding to me. Officer Bocoock came down to the cell at approximately 1725 and opened the door for Nurse Mike. Mike entered the cell and rolled her over to find a substance that had come out of her mouth and her to be unresponsive.
Nurse Mike instructed the responding staff to move her out of the cell and apply oxygen and to place the defibrillator onto inmate Hills chest, no shock was advised so CPR was started. Officer Strege was the first to do CPR then Officer Hoschka then I took over for her and completed a round of chest compressions which lasted approximately a minute and a half, then I was revealed by nurse Mike.
Once the Fire Department and the ambulance crew were on scene they had Inmate Hill moved out by the phones in front of 2w22 were there was more room. Then they took over CPR and attempted to take care of her medical issues.
At one point inmate Hill was pronounced dead. Then one of the fire department personal found a heart beat, so they continued with her medical care and once they were ready they transported inmate hill to the hospital.
I was informed that Inmate Hill later passed away at the hospital.

End of report

Milholland 591263

Creating Officer: White, Justin L Time: 08/25/2018 20:19 / Updating Officer: White, Justin L Time: 08/25/2018 20:29

While working on 082518 at about 1725 hours, I was performing my normal duties as a shift sergeant. Officer Milholland called via the radio that he needed medical to come check an unresponsive female in 2W27. I asked over the radio if the inmate was breathing and Officer Milholland stated he wasn't sure. I instructed Officer N. Petrie to take the red bag up to 2W. I responded to 2W with Officers N. Petrie, Epley and Hoschka.

When I arrived on 2W I began heading to 2W27 where inmate Hill, Cindy L was housed. When I arrived, Hill was being brought out of the cell so chest compressions could be started. Officer Strege began chest compressions at the direction of Nurse Kallsen. I immediately called for a code ambulance and had Officers Epley and N. Petrie standing by for transport.

I instructed Officer Titchenal to go get magnets from the CRT closet and place them over the windows. I also notified Lt. Robison at 1732 hours of the incident. Officers Strege, Hoschka and Milholland rotated through CPR at the direction of Nurse Kallsen. Spokane Fire Department and American Medical Response both arrived at about 1739 hours and took over life saving measures. SFD requested that Hill be moved from the hallway out to by the phones where there was more room to work. Once Hill was moved out of the hallway lifesaving measures were resumed.

Just before 1800 hours, SFD called Dr. Harris at Sacred Heart Medical Center and he pronounced Hill deceased at 1800 hours via the phone. I notified Lt. Robison of the situation and was about to notify county radio of the in-custody death when one of the fire fighters stated she felt a heartbeat again.

Lifesaving measures were restarted by SFD and AMR. The decision was made to transport Hill to the hospital. Hill was placed on a backboard and then on the stretcher. Hill was taken to the ambulance and transported to SHMC. I notified county radio that we would need them to investigate a potential death at the jail. I instructed the 2W officers to secure 2W27 and not open it until it was cleared by patrol or the detectives.

I received a call from Officer N. Petrie one of the transporting officers that Hill had been pronounced diseased at 1831 hours. I returned to my

Incident #: 13245

Creator: Milholland, Matthew M

Date: 08/25/2018 19:09

Status: OPEN

Closed By:

Closed Date:

Cell:

Location:

normal duties.

Time Line

1725- Initial assistance call
1730- CPR started by Officer Strege
1732- CPR Officer Hoschka
1734- CPR Officer Milholland
1737- CPR Nurse Kallsen
1738- CPR Officer Strege
1739- SFD Engine 3 and AMR 121 arrive
1740- SFD and AMR take over lifesaving measures
1800- Pronounced deceased by Dr. Harris SHMC
1802- Pulse found by SFD and lifesaving measures restarted
1813- Transported to SHMC
1831- Pronounced deceased at SHMC

Report Number 2018-10119070

Sgt. White

#591459

Creating Officer: Titchenal, Travis P Time: 08/25/2018 20:19 / Updating Officer: Titchenal, Travis P Time: 08/25/2018 20:19

On 08/25/18 at approximately 1725hrs I was working on 2W. At that time I was on my lunch break in the 1st floor break room. I heard an assistance call from 2W for an unresponsive female in cell 2W27. I responded from the break room.

Before I arrived Sgt. White asked CCR to call for a code ambulance. When I arrived to 2W27 I observed staff administering CPR to a female inmate. Sgt. White asked me to retrieve magnets from the CRT closet to cover cell windows. I went and got them, brought them back, and covered the 2W overflow cell windows (2W24-2W29).

The ambulance crew (AMR) arrived at approximately 1733hrs. The paramedics (Fire) arrived at approximately 1734hrs. AMR and the Fire crew began chest compressions and life saving measures immediately after they got to the inmate (Hill, Cindy L.).

When the paramedics were ready, they placed inmate Hill on their gurney. After that they took inmate Hill to the hospital via ambulance.

I then returned to my duties on 2W. END REPORT.

Creating Officer: Strege, Nathan Time: 08/25/2018 20:28 / Updating Officer: Strege, Nathan Time: 08/25/2018 20:28

On August 25, 2018 at approximately 1725 while working my assigned duties in 1 West Booking I overheard an assistance call from the 2 West Officer for an unresponsive female in 2W27. I responded with booking staff. When I arrived, I observed a female laying on the floor of 2W27 near a small pool of blood and vomit. Nurse Kallsen began to assess the Inmate later identified as Hill, Cindy Lou CID#412473. Kallsen then removed Hill from the cell and placed an AED device on Hill. I then started chest compression while Nurse Race started providing oxygen. I completed 2 rounds of chest compressions before being relieved by Officer Hoschka. After a few rounds of compressions, I resumed chest compressions until I was relieved by Spokane Fire Department. AMR, Fire and Medical took over chest compressions and continued to provide lifesaving measures to Hill. AMR then transported Hill to the hospital.

I returned to my assigned duties without further incident.

Officer N. Strege

59-1964

End of Report

Creating Officer: Bocook, Ezra Time: 08/25/2018 20:43 / Updating Officer: Bocook, Ezra Time: 08/25/2018 21:29

On 08/25/18 I was working my normal duties as the break relief officer, at approximately 1725 I heard Officer Milholland knocking on cell door 2W27 trying to get the Inmates attention, later identified as inmate Hill, Cindy. Hill was not responding. I walked over to the cell as Officer Milholland was calling for assistance via radio. I opened the cell door as the assisting Officers responded along with medical. Medical entered the cell first and rolled Hill from her side to her back and pulled her out of the cell for more room. Sgt. White immediately called for a code ambulance as medical personnel and Officer Strege started cpr. Fire and ambulance arrived and took over life saving measures. I returned to my normal duties and later found out Inmate Hill had passed.

End of report Bocook(2019)

Creating Officer: Epley, Ryan Time: 08/25/2018 21:51 / Updating Officer: Epley, Ryan Time: 08/25/2018 21:51

Incident Report

JailTracker ® Report Printed On 08/25/2018 21:54 by UserID 578

Default
Page 2 of 3

Incident #: 13245

Creator: Milholland, Matthew M

Date: 08/25/2018 19:09

Status: OPEN

Closed By:

Closed Date:

Cell:

Location:

On 08/25/18 I was assigned to work 1 West. At approximately 1725 hours Officer Milholland called via radio that he needed medical to come check on an unresponsive inmate in 2W27. I, along with booking personnel, responded to 2 West.

When I arrived at 2W27, an inmate (later identified as Hill, Cindy) was lying face down in her cell. Medical, along with Officer's, brought inmate Hill out of the cell and began life saving measures. I was assigned to transport inmate Hill to the hospital. I left 2 West to set up a transport bag and grab a vehicle. Once completed, at approximately 1739 hours I assisted in escorting Fire/EMS to inmate Hill's location.

When it was decided that inmate Hill was going to be transported via code ambulance, I followed the ambulance to Sacred Heart Hospital.

At the Hospital, inmate Hill was pronounced dead at 1831 hours. Officer Petrie notified Sergeant White via telephone of the time of death. Myself and Officer Petrie took post outside the hospital room door until we were relieved by Detective Drapeau.

We returned to the Spokane County Detention Center. I resumed normal duties with no further incident.

Creating Officer: Petrie, Nicolas Time: 08/25/2018 21:51 / Updating Officer: Petrie, Nicolas Time: 08/25/2018 21:51

On 08/25/2018 at approximately 1725 hours I was working my assigned duties in the 1 West booking area. I heard a radio transmission, stating there was an unresponsive female in 2W27, later identified as Hill, Cindy. I responded with booking staff to 2 West and brought the medical red bag. Inmate Hill was unconscious when I arrived. I opened the medical bag and assisted the medical team in retrieving the defibrillator and oxygen equipment.

The decision was made to transport inmate Hill to Sacred Heart Medical Center via ambulance. I accompanied inmate Hill in the ambulance while paramedics continued efforts to revive her. Inmate Hill was pronounced dead at 1831 per medical staff. Officer Epley and myself kept post outside of the hospital room, until later relieved by Detective Drapeau.

I returned to the hospital at approximately 2100 hours and returned to my normal duties in the 1 West booking area.

Signature